

Court telephone no.

REQUEST

-
- | | |
|----------------------|---------------|
| City, state, and zip | Telephone no. |
|----------------------|---------------|

ORDER

Judge _____ Bar no. _____

Do not write below this line - For court use only

Complete this Financial Schedule if you are seeking a court appointed attorney.

FINANCIAL SCHEDULE

| | |
|--|---|
| 1. RESIDENCE <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Live with parents <input type="checkbox"/> Room/Board | |
| 2. MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Dependents: _____ Number | |
| 3. INCOME a. Employer name and address | b. Length of employment |
| | c. Average of pay <input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> every two weeks Gross: \$ _____ Net: \$ _____ |
| d. Other income (state monthly amount and source [FIA, VA, rent, pensions, spouse, unemployment, etc.]) | |
| 4. ASSETS State value of car, home, bank deposits, bonds, stocks, etc. | |
| 5. OBLIGATIONS Itemize monthly rent, installment payments, mortgage payments, child support, etc. | |
| 6. REIMBURSEMENT I understand that I may be ordered to reimburse the court for all or part of my attorney and defense costs. | |

I declare under penalty of contempt of court that the above information is true to the best of my information, knowledge, and belief.

Date

Signature